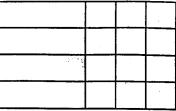


REFF ENCE SHEET FOR UNDESIGNATED WELLS



1. Date: 7/12/01	
2. Type of Well: Oil Well Gas Well	
3. County;	

4.	Operator Name: Dil & Gas Co		API NUMBER 30-025-32788
5.	Address of Operator: PD Box 2267 Midland	L Tx 79702	
7.	Lease name or Unit Agreement Name: Hallwood 12 Federal		7. Well No.
8.	Well Location Unit Letter : 1830 feet from the		_feet from theline
	Section 12 Township 255	Range 33e NMPM	·
9.	Completion Date:	11. Perfs top	bottom
	1/5/95	17252	12312
10.	Name of Producing Formation:	12. Open Hole casing shoe	PBTD or TD
	Bone Spring		
	C-123 Filed: 15. Name of Pool Requested Red H- \\S B	one Spring	(51020)
16.	Remarks Ext	, 7	

TO BE COMPLETED BY DISTRICT GEOLOGIST 17. POOL NAME 18. POOLID #								
11	POOL NAME						18. POOLID#	
T	S, R	Е	Т	S, R	E	Т	S, R	Е
Sec			Sec			Sec		
Sec Sec			Sec			Sec		
Sec			Sec			Sec		

19. ADVERTISED FOR HEARING:	20.	CASE NUMBER:
21. Name of pool for which was advertised.		
22a. Placed in Pool	22b.	By order number